

OPIOID TASK FORCE APPLICATION

Assembly Bill 132 of the 2023 Legislative Session created the Clark County Regional Opioid Task Force ("the Task Force")

The Task Force will review data relating to opioid overdose fatalities and near fatalities and use such data to identify gaps in community services relating to opioids and opioid overdose fatalities. The Task Force will review available data from existing state and community databases and, in particular, information relating to harm reduction and substance abuse. Task Force members shall identify trends in the social determinants of health relating to opioid overdose fatalities and identify opportunities for prevention to promote recovery and to collaborate to leverage existing resources to prevent substance misuse.

The task force is comprised of fifteen (15) members appointed by the Clark County Board of County Commissioners for a term of one year to expire December 31, 2024. At the close of this term, the Task Force will be asked to provide a report summarizing their work and providing any legislative recommendations. Meetings will be held a minimum of once each quarter, and are required to begin in January 2024.

The members must be certain persons, represent certain organizations or agencies or have expertise in certain areas. The members of the Board shall consist of the following:

- (1) One member who represents a social services agency in Clark County;
- (2) One member who represents the Department of Family Services of Clark County;
- (3) One member who represents the Department of Juvenile Justice Services of Clark County;
- (4) One member who represents the Southern Nevada Health District;
- (5) One member with experience in the field of public health epidemiology selected from a list of nominees submitted by the Southern Nevada Health District;
- (6) One member with experience in the field of primary health;
- (7) One member with experience in the field of mental health;
- (8) One member who represents the Clark County School District;
- (9) One member who represents law enforcement selected from a list of nominees submitted by the Las Vegas Metropolitan Police Department;
- (10) One member with experience in the field of behavioral health;
- (11) One member with experience in the field of addiction medicine;
- (12) One member who represents a provider of emergency medical services in Clark County;
- (13) One member who represents public health educators or community health workers who represent or serve persons with limited-English proficiency;
- (14) One member who represents a substance use disorder prevention coalition in Clark County; and
- (15) The Clark County coroner or his or her designee.

Application Overview:

If you are interested in applying for membership on the Regional Opioid Task Force, please complete the application below. If you have any questions related to the Task Force or the application process, please email administrative.services@clarkcountynv.gov.

(Note: This document and accompanying materials become public record once it is received by Clark County.)

Please select the position you are apply for: Choose an item.
Full name (First, Middle Initial, Last):
Home Street Address:
Home Address City/State/Zip Code:
Mailing Address:
Mailing Address City/State/Zip Code:
Employer:
Occupation:
Email Address:
Cell Phone:
Best Daytime Contact Phone:

Relevant Affiliations: Please list below any other committees you are currently serving on. Please list, if applicable, the jurisdiction and term of appointment. If you were appointed by an individual and not by a local jurisdiction, please include that information. If you need additional space, please attach an additional sheet of paper.

Skills and Experience: Please provide a brief description of your qualifications for the seat; include any special skills, interests, experience, or training which you possess or have completed that would benefit the work of the Regional Opioid Task Force. If you need additional space, please attach an additional sheet of paper.		
A resume and letter of interest is REQUIRED. Please attach it to this application.		
I certify that the information provided in the accurate to the best of my knowledge.	is application and supporting documentation is true and	
Signature	Date	
Printed Name		
You may submit this application and support	rting documentation via:	
Hand Deliver or Mail Application to:		
Clark County 500 S. Grand Central Pkwy.		
Las Vegas, NV 89155		
Attn: Administrative Services		
Lobby Hours: Monday through Thursday, 7:3	0 a.m. to 5:30 p.m.	

Email Scanned Copy to:

administrative.services@clarkcountynv.gov